PET	TITION FOR EXTENSION OF TIME UNDER 3	Docket Number (Optional) 020979-000510US			
	FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 200				
Application Number 10/612,833			Filed July 1, 2003		
For METHODS AND DEVICES FOR TREATING ANEURYSMS					
Art Unit 3738			Examiner SUZETTE JAMIE JACKSON		
арри	is a request under the provisions of 37 CFR $1.136(a)$ cation.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):					
		<u>Fee</u>	Small Entity Fee		
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$	
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$	
	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ <u>510</u>	
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
\boxtimes	Applicant claims small entity status. See 37 CFR 1,27.				
	A check in the amount of the fee is enclosed.				
	Payment by credit card. Form PTO-2038 is attached.				
\boxtimes	The Director has already been authorized to charge fees in this application to a Deposit Account.				
\boxtimes	The Director is hereby authorized to charge any fees which may be required, or credit any overnayment to				
	Deposit Account Number 20-1430 I have enclosed a duplicate copy of this sheet.				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
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I am the applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71.					
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).					
	attomey or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34				
		in.	م الله الله		
	Signature		July 18, 2006 Date		
-	James M. Heslin, Reg. No. 29,541		650.326.2400		
	Typed or printed name.		Telephone Number		
IOTE: S ine sign	signatures of all the inventors or assignees of record of the entire it ature is required, see below.	nterest or their represent	ative(s) are required. Subn	nit multiple forms if more than	
	otal of forms are subm	nitted.			